

12-26-01 JONES, JEFFREY HEPBURN

A

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

CHECK BOX, if applicable:

☐ DUPLICATE

J1021 U.S. PTO
12/18/01

Address to:

Assistant Commissioner for Patents
Box PATENT APPLICATIONS
Washington, D.C. 20231

Customer No.: 022844

Attorney Docket No.: 198-1276

Inventors: Robert Hammerle, Jeffrey Hepburn

Express Mail No: EL764777180US

Total Pages:

1. ☒ Specification Total Pages:
2. ☒ Drawings Total Sheets:
3. Oath or Declaration Total Pages:
 - a. ☐ New executed (original or copy)
 - b. ☐ Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 16 completed)
[Note Box 4 below]
 - i. ☐ **DELETION OF INVENTORS**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
4. ☐ Incorporation By Reference (useable if Box 3b is checked)
The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 3b, is considered as being part of the disclosure of the disclosure of the accompanying application and is hereby incorporated by reference therein.
5. ☐ Microfiche Computer Program (Appendix)
6. ☐ Assignment Papers (cover sheet & documents(s))
7. ☐ 37 CFR 3.73(b) Statement (when there is an assignee) ☐ Power of Attorney
8. ☐ English translation Document (if applicable)
9. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
10. ☐ Preliminary Amendment
11. ☒ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
12. ☐ Certified Copy of Priority Document(s) (If foreign priority is claimed)
13. ☐ Please cancel claim(s) _____
14. ☐ Please add the following after the Title of the Invention:
This is a Continuation in Part of U.S. Serial No. 09/322,299, filed 05/28/1999.
15. ☒ The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 06-1510. If insufficient funds, please charge to Deposit Account No. 06-1505
 - a. ☒ Fees required under 37 CFR 1.16.
 - b. ☒ Fees required under 37 CFR 1.17.
 - c. ☐ Fees required under 37 CFR 1.18.

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16. ☐ Other: _____

17. ☒ If a **CONTINUING APPLICATION**, check appropriate box and supply the requisite information:
☐ Continuation ☐ Divisional ☒ Continuation-in-part (CIP)
of prior application No.: 09 / 322,299

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
TOTAL CLAIMS (37 CFR 1.16(c))		18	-0-	x\$18	-0-
INDEPENDENT CLAIMS (37 CFR 1.16(b))		4	1	x\$80	80.00
MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d))				X\$270	
				BASIC FEE (37 CFR 1.16(a))	\$710.00
				Total of Above Calculations =	\$790.00
				Reduction by 50% for filing by small entity (Note 37 CFR 1.9, 1.27, 1.28).	
				TOTAL =	\$790.00

18. CORRESPONDENCE ADDRESS

☒ Customer Number **022844** or ☐ Correspondence address below
or Bar Code Label (Insert Customer No. or Attach bar code label here).

NAME	John Buckert				
ADDRESS					
CITY		STATE		ZIP CODE	
COUNTRY		TELEPHONE	313-323-1617	FAX	(313)322-7162

18. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME	John Buckert
SIGNATURE	<i>John Buckert</i>
DATE	December 18, 2001